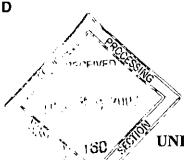
FORM D



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

	/				
OMB APPI	ROVAL				
OMB Number: 3235-00 Expires: November 30, 20					
Estimated average burden					

	SEC	USE	ONLY	
Prefix				Serial
	DATE	REC	EIVED	

Name of Offering (check if this is an amendment and name has changed, and indicate change.) Trustbridge Partners II, L.P.	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Type of Filing: New Filing Amendment	Section 4(6) ULOE
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Trustbridge Partners II, L.P. (the "Partnership")	07087930
Address of Executive Offices (Number and Street, City, State, Zip Code) c/o Walkers SPV Limited, Walker House, 87 Mary Street, George Town KY1-9002, Grand Cayman, Cayman Islands	Telephone Number (Including Area Code) 8621-5876-8782
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business Investment vehicle.	PROCESSED
Type of Business Organization	PHOC
corporation Imited partnership, already formed other (please specify):	JAN 1 0 2008
business trust limited partnership, to be formed	JAN
Actual or Estimated Date of Incorporation or Organization: Month Year	Estimated FINANCIAL

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

•		A. BASIC IDENT	TFICATION DATA					
2. Enter the information re	quested for the follow	ing:	<u> </u>					
Each promo	• Each promoter of the issuer, if the issuer has been organized within the past five years;							
 Each benefic issuer; 	cial owner having the p	power to vote or dispose, or c	lirect the vote or disposition	of, 10% or more of	a class of equity securities of the			
Each execut	ive officer and director	r of corporate issuers and of o	corporate general and manag	ing partners of parti	nership issuers; and			
Each genera	I and managing partne	r of partnership issuers.						
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if TB Partners GP2, L.P. (the								
Business or Residence Addres c/o Walkers SPV Limited, W	s (Number and Street, Valker House, 87 Mai	City, State, Zip Code) y Street, George Town KY	1-9002, Grand Cayman, C	ayman Islands				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if TB Partners GP Limited	individual)							
Business or Residence Addres			1-9002, Grand Cayman, C	ayman Islands				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if Li, Shujun	indiviđual)							
Business or Residence Addres	s (Number and Street,	City, State, Zip Code)						
c/o Walkers SPV Limited, V	Valker House, 87 Mai	ry Street, George Town KY	1-9002, Grand Cayman, C	ayman Islands				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if	individual)				11 ·			
Business or Residence Address	ss (Number and Street,	City, State, Zip Code)						
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if	individual)							
Business or Residence Address	ss (Number and Street,	City, State, Zip Code)						
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if	individual)							
Business or Residence Address	s (Number and Street,	City, State, Zip Code)						
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if	individual)							
Business or Residence Address	ss (Number and Street,	City, State, Zip Code)						

_					B. IN	NFORMAT	ION ABOU	T OFFERI	NG			_		
				Answer als	so in Appen	dix, Column	2, if filing t	inder ULOE	;				YES	NO
1	* The Gener	al Partne	r reserves	the right to	accept less	er amounts.	•						vec	NO
4. I s a c	Enter the infi similar remunassociated pedealer. If moderate the contract of t	ormation in neration for rison or agore than fir or or dealer	requested for solicitations of a brown of a brown of a brown of a brown only.	or each per on of purcha oker or dea ons to be lis	son who ha isers in com ler registere	s been or w nection with d with the S	rill be paid of sales of sec SEC and/or	or given, di curities in th with a state	rectly or in e offering. or states, li	idirectly, ai If a persor ist the nam	ny commission to be listed e of the brok	on or is an eer or	YES	NO
Full Na	me (Last nai	ne first, if	individual)	1										
	ss or Resider	ce Addres	ss (Number	and Street,	City, State,	Zip Code)								·
Name o	of Associated	Broker o	r Dealer				•	•						
Ctatagie	n Which Pers	a Listad	Una Caliais	ad an Intend	la ta Calinit	Durahagara								
States ii											П.,,,	C4-4		
[AL] [IL] [MT] [RI]	(Check ") [AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	ndividual St [CA] [KY] [NJ] [TX]	ates) [CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	Ali [HI] [MS] [OR] [WY]	States [ID] [MO] [PA] [PR]		
	iness or Resi			per and Stre	et, City, Star	te, Zip Code)							
States	s in Which P	erson Liste	ed Has Soli	cited or Inte	nds to Solic	it Purchaser	s				()			
(Check ' [AL] [IL] [MT] [RI]	"All States" ([AK] [IN] [NE] [SC]	or check ir [AZ] [IA] [NV] [SD]	idividual St [AR] [KS] [NH] [TN]	ates) [CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	(FL) (MI) (OH) (WV)	[GA] [MN] [OK] [WI]	All [HI] [MS] [OR] [WY]	States [ID] [MO] [PA] [PR]		
Full Na	ıme (Last naı	me first, if	individual))				·	<u> </u>					
Bus	siness or Res	idence Ad	dress (Num	ber and Stre	eet, City, Sta	ate, Zip Code	e)							
Nar	ne of Associ	ated Broke	er or Dealer							·				
States	s in Which P	erson Listo	ed Has Soli	cited or Inte	nds to Solic	it Purchaser	s							
(Chec	k "All States	" or check	individual	States)	***************************************				•1•••••••••	**************	А	Il States	5	
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	(HI) (MS) (OR) (WY)	[ID] [MO [PA] [PR]		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

I.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
	Type of Security	Aggregate Offering Price	:	Amount Already Sold
	Debt	\$ -0-	\$	-0-
	Equity	\$ -0-	\$	-0-
	Common Preferred			
	Convertible Securities (including warrants)	\$ -0-	<u> </u>	-0-
	Partnership Interests	\$ 250,000,000		237,500,000
	Other (Specify)	\$ -0-	, <u>s</u>	-0-
	Total	\$ 250,000,000		237,500,000
	10tai	3 230,000,000		237,300,000
2.	Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total line. Enter "0" if answer is "none" or "zero."			
	Accredited Investors	Number Investors 19	s	Aggregate Dollar Amount of Purchases 237,500,000
	Non-accredited investors	-0-	<u> </u>	-0-
		NA	<u> </u>	NA
	Total (for filings under Rule 504 only)	INA		NA.
3.	Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.	Tr. c		D.B. A.
	Type of offering	Type of Security		Dollar Amount Sold
	Rule 505	NA	\$	NA
	Regulation A	NA	\$	NA
	Rule 504	NA	S	NA
	Total	NA	S	NA
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees	🔯	\$	-0-
	Printing and Engraving Costs	🛛	\$	-0-
	Legal Fees	🛛	\$	300,000
	Accounting Fees	🛛	s	-0-
	Engineering Fees	🛛	s	-0-
	Sales Commissions (specify finders' fees separately)	🛛	s	-0-
	Other Expenses (identify) Travel and miscellaneous	🛚	s	50,000

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

350,000

ournoses shown. If the amount for	idjusted gross proceeds to the issuer used or proposed to be r any purpose is not known, furnish an estimate and check yments listed must equal the adjusted gross proceeds to t bove.	the box to the left of	
		Payments to Officers Directors & Affiliates	Payments to Others
Salaries and fees		<u> </u>	<u> </u>
		5 7	<u> </u>
	allation of machinery and equipment		<u>s</u> .
	Idings and facilities		
	luding the value of securities involved in this		
offering that may be used in exchan	ge for the assets or securities of another		⊠ s -0-
issuer pursuant to a merger)	— 	_ <u> </u>	
			_ <u> </u>
Working capital		<u>S</u> <u>-0-</u>	_ <u> </u>
Other (specify) Portfolio Investm	ents	⊠ <u>s -0-</u>	<u>\$249,650,000</u>
			
		<u>S -o-</u>	_ <u> </u>
Column Totals		<u></u> <u>s -0-</u>	\$249,650,000
	als added)	K***X	249,650,000
	D. FEDERAL SIGNATURI	E	
ssuer has duly caused this notice to be dertaking by the issuer to furnish to the accredited investor pursuant to paragr	e signed by the undersigned duly authorized person. If this he U.S. Securities and Exchange Commission, upon written aph (b)(2) of Rule 502.	notice if filed under Rule 505, the follor request of its staff, the information fur	wing signature constitutionished by the issuer to a
r (Print or Type)	Signature	Date	10 -
tbridge Partners II, L.P.	G PL.	1/21	12007
e (Print or Type)	Title of Signer (Print or Type) Director of TB Partners GP Limited, the	he General Partner of TB Partner	GP2, L.P., the Gen
un Li	Partner of the Partnership		

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).